# Older adults and the pandemic: tackling loneliness through technology

### Introduction

The Wales Centre for Public Policy (WCPP) was commissioned by the Welsh Government to find out how technology was being used during the COVID-19 pandemic in Wales to build social connections and tackle loneliness and social isolation among older adults.

As part of this work, the University of Bath was commissioned to carry out the research. The research involved a survey and interviews with health and social care service providers and interviews with older adult service users. It sought to explore how, and how far, digital technologies have been used to address loneliness among older adults during the pandemic and to identify what might be learned for future efforts to tackle loneliness among this group. This briefing summarises the findings of the research.

# **Background**

Loneliness and social isolation have significant impacts on older people's health and wellbeing. This has been a priority issue for the Welsh Government since before the COVID-19 pandemic and is addressed in several Welsh Government policy frameworks and strategies including A Healthier Wales: our plan for health and social care (Welsh Government, 2018), Connected Communities strategy (Welsh Government, 2020a) and Age Friendly Wales: a Strategy for an Ageing Society (Welsh Government, 2021).

During the pandemic, social distancing measures increased the risk of loneliness and social isolation and accelerated the use of technology to facilitate social contact and connection.

# What is loneliness?

Loneliness is a subjective feeling experienced when there is a gap between desired and actual social contact (Age UK, 2021). It is a significant risk factor for negative physical and mental health problems (Courtin & Knapp, 2017) being associated with earlier mortality, increased risk of cardiovascular diseases, neurocognitive disorders, and negative mental health outcomes (Davidson & Rossall, 2015).

Although loneliness is distinct from social isolation, which refers to a lack in the quantity rather than the quality of social contacts, social isolation does increase the risk of loneliness.

# How was technology mobilised?

The survey found that addressing loneliness and social isolation was a clear priority for the roles of the health and social care respondents and for their organisations. Almost all organisations had sought to prevent or reduce older service users' experiences of loneliness and social isolation during the pandemic by encouraging or

enabling them to link with people within and outside their organisation, for example with support groups, friends, family, or other service users.

While the research found that the one-to-one phone call was a key means of contact between service providers and older adult service users during the pandemic, other digital technologies were provided and used to enable and support social connections. New devices provided to older adults across Wales included iPads and other tablets, Komp, WiFi devices, Echo and Alexa and other smart home devices. A variety of software platforms were used: Zoom, Teams, WhatsApp, Facebook, Skype, and FaceTime to keep in touch with family and friends.

Support and training in digital skills was provided in several ways. Uptake of digital training by older adult service users was, however, generally low and service providers recognised that training needed to be improved.

### **Enablers and barriers**

There was a clear view amongst service providers that 'some', if not 'many' older adult service users had increased their capability to use technology to connect with others during the pandemic.

There were examples of specific areas where older adults felt more confident and capable. While this confidence was sometimes limited to particular types of use, (e.g. Netflix, online shopping) there were also examples where confidence in one area transferred to enable adoption and usage for other purposes.

A number of older adult service users described being motivated to maintain existing social connections or meet new people as reasons for engaging with technology. It is under these circumstances - where the goal is to seek or enhance social connection - that loneliness is reduced rather than increased by technology use (Nowland et al, 2018).

A lack of skills, confidence, and motivation as well as physical resources limited uptake and use of technology among older adults. Heightened concerns about security and scams were another barrier.

"...people who haven't used digital equipment are afraid of digital equipment because it's a whole different ball game. It is like learning a whole new language..."

Where social isolation was amplified by a lack of physical resources and motivation, encouraging the uptake of digital technology to enable social connection was extremely challenging.

There were also organisational barriers to the effective use of technology to broker social connections. The familiarity, skills and motivations of service provider organisations also mattered, as well of course as their ability to supply (or at least service the supply of) the appropriate equipment.

It was clear from the research that **organisational readiness** was required to support using technology for social connection. All aspects of organisational readiness could be enhanced by interorganisational working.

# Benefits and challenges

Most service providers engaged in the survey (44, 72%) thought that it was appropriate or extremely appropriate to communicate with older adult service users using technology. For those that considered the use of technology to communicate with service users as extremely appropriate (n=17), there was a clear focus on the benefits: the role it plays in daily life, that it breaks down barriers, opens up opportunities that encourage social participation and reduce loneliness, helping to keep people in touch and feel valued.

Some service providers emphasised that the use of new technologies and apps had meant that social groups could continue – or new

groups be established – during the pandemic and that this was vital in a context where all face-to-face group activity had stopped.

Service providers noted the potential for service users to participate in virtual groups beyond the duration of COVID-19 restrictions, where distance, a lack of transport options or mobility issues would normally prohibit participation.

Challenges were also identified by service providers around using technology to prevent or mitigate loneliness during the pandemic. Firstly, it was noted that even when working well, digital technology that connects people is not a 'magic bullet' - people can still feel lonely. Indeed, some suggested that virtual connections may intensify feelings of loneliness and isolation (Barbosa Neves et al., 2021). There was also a keen awareness of the ways in which technological links could not replace or reproduce the benefits of face-to-face contact.

# "Some people said it's not the same as meeting people, which it isn't, is it?"

For the organisations that had little or no experience of using technology to foster social connections prior to the pandemic, it was a challenge to be reactive, having little chance to plan and needing to learn rapidly through trial and error. Maintaining and facilitating services to enable digital connection was an ongoing challenge in a context of constrained resources and capacity. These constraints led to links and partnerships with other organisations being established.

The challenges for older adults focused on the frustrations around learning to use digital technology to complete everyday tasks in unfamiliar ways. Once 'behind', it felt like a hopeless endeavour to try and 'catch up', leaving them feeling alienated.

When asked if the use of technology to connect with others had especially positive or negative

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impacts on particular groups of older people, some service providers drew attention to service users with dementia, highlighting that even with support, digital devices had been challenging and difficult for this group, at times adding to distress and confusion.

Unpaid carers, on the other hand, were one group that may have unexpectedly benefited from increased digital provision during the pandemic. Carers often feel lonely due to their caring responsibilities which can constrain their interactions outside of the home. In this setting, the benefits of technology and the online interactions it afforded may have favourably compared with the usual situation of very limited opportunity for face-to-face interactions.

Some service providers noted that it was difficult to stay in touch with older adults with physical, sensory or learning disabilities using technology – hearing difficulties were noted as being particularly problematic.

# Important reflections

The final report draws out the policy implications of the research in a number of areas, including:

**Evaluation:** There was little evidence of formal evaluation of the impact that the use of technology had on the loneliness and social isolation of older adult service users. To address this, collection of relevant data should be routinely embedded in existing patterns of contact with service users. The use of standard validated items of loneliness to be used in evaluations1 would help to build understanding of what interventions are working where and for whom. An explicit focus of evaluation should be around digital exclusion, exploring whether the impact of providing equipment and support reduces or expands differences in social isolation and loneliness for different groups. A realist approach to evaluation could be usefully considered (HM Treasury, 2020), i.e., what works,

<sup>&</sup>lt;sup>1</sup> <u>Brief-Guide-to-measuring-Loneliness-Feb2019.pdf</u> (whatworkswellbeing.org)

for which people, in what ways, in what contexts and how?

- Smartphone as 'entry point': Phones were the most important device used by service providers to communicate with older adults. Consideration might usefully be given to how smart phones could serve as a 'gateway' device to encouraging more confident and broader engagement with the other ways in which they can afford social connection this approach may enable the uptake of other devices. It would also be useful to explore whether the use of phones reflects service user preferences, or pre-COVID-19 assessments of capability. Some services users may prefer video calls where they are now equipped to do so, so a flexible approach to future provision should be open to change.
- Introducing managed devices: The extensive functionality of devices sometimes carried a sense of threat for older adults. Challenging this fear through clear messaging or offering a telephone helpline (which could be shared across organisations), might provide a safety net to encourage greater usage. Where resources allow, a more targeted and programmatic approach to providing some older adult service users with 'managed devices' could be taken, although this will depend on the capabilities of older adults and the nature of their support networks.
- Technological readiness
   assessments: There is huge variability in the technical abilities of older adults, in the resources that they have access to and in their motivation and interest in using digital devices. The evidence in this area suggests uptake of social technologies is primarily determined by what individuals need, value and what motivates them (Centre for Ageing)

Better, 2018). Consideration might usefully be given to integrating a brief assessment of technological readiness, motivation and capability within initial routine assessments conducted by organisations. This could help to understand what physical, social and motivational resources older adults have at their disposal and identify the most cost-effective ways of enhancing or maintaining them. It would also enable local authorities and other organisations to use their resources more effectively (Leicester Ageing Together, no date).

 Organisational strategy and workforce training: Organisations varied in how equipped they were for supporting people to make and maintain digital connections to reduce social isolation and loneliness during the pandemic. Given the health and wellbeing impacts of loneliness and the evident organisational commitments to preventing or mitigating loneliness in Wales, plans to increase the digital capability of older adults should be a priority even though – or indeed because - the immediate crisis of the pandemic is over. This means attending to organisational processes and people that can support this as well as how best to encourage and amplify the resources of, where present, informal networks of family and friends. We should also not ignore the workforce challenges involved in upskilling both staff and volunteers.

# "We will see a new norm established with a mix of face to face and virtual meetings taking place."

In summary, services for older people can capitalise on lessons learned by embedding evaluation; enabling wider digital access through the smartphone as 'entry point' or gateway; managing the threat of scams; including

assessment of technological readiness in routine assessments of older adult service users; and prioritising plans to increase the digital capacity of older adults even though indeed because - the immediate crisis of COVID-19 has receded.

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# Find out more

For the full report see: Barnett, J., et al (2022) Using technology to tackle loneliness among older adults during the COVID-19 pandemic.

# About the Wales Centre for Public Policy

Here at the Centre, we collaborate with leading policy experts to provide ministers, the civil service and Welsh public services with high quality evidence and independent advice that helps them to improve policy decisions and outcomes.

Funded by the Economic and Social Research Council and Welsh Government, the Centre is based at Cardiff University and a member of the UK's What Works Network.

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